



Tumbling Pavilion Birthday Party Registration Form



Party Date: _____

Preferred Time (Please Circle): 12:00-2:00 2:30-4:30 5:00-7:00

Birthday Child Name and Age: _____

Registration Date: _____

Party Host Name: _____

Party Host Address: _____

Party Host Phone: _____

Party Host Email: _____

****OFFICE USE****

Reservation made by: _____

Cash \$ _____ Check \$ _____ Check #: _____

Debit/Credit Card (attach receipt) \$ _____ Transaction #: _____